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CONFIRMATION NO. 7216

SERIAL NUMBER 10/635,074	FILING DATE 08/06/2003 RULE	CLASS 148	GROUP ART UNIT 1742	ATTORNEY DOCKET NO. H 3583 A
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APPLICANTS

Ibolya Bartik-Himmler, Wuppertal, GERMANY;

Hans-Willi Kling, Wuppertal, GERMANY;
Werner Opitz, Langenfeld, GERMANY; Jens Seemann, Duesseldorf, GERMANY;

** CONTINUING DATA *****

This application is a CON of 09/868,288 09/17/2001 PAT 6,627,006 *
 (*)Data provided by applicant is not consistent with PTO records.

** FOREIGN APPLICATIONS *****

None *Signature*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/01/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GERMANY	0	11	1

ADDRESS

Glenn E. J. Murphy
 Henkel Corporation
 Law Department
 2500 Renaissance Blvd., Suite 200
 Gulph Mills, PA
 19406

TITLE

Method of controlling a treatment line

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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